										Application or Docket Number						
	PATENT A	PPLI	ICA	TIOI	N FEE DI	TE	RMINATIO	N RECO	RD			1			1	
•	• • • • • • • • • • • • • • • • • • • •	1	Effe	ctive	Decemb	er 2	9, 1999				2	٤١٤	73	832		
GLAIMS AS FILED - PART I (Column 1) (Column 2)											SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
FOR NUMBER FI					R FILED	FILED NUMBER E			1	RAT	E	FEE	•	RATE	FEE	
BASIC FEE A						·	•				345.00	OR		690.00		
	AL CLAIMS	•	C)C minus 2			20-	Da '			X\$ 9=			OR	X\$18-		
INDEPENDENT CLAIMS 3 minus 3 = "						•		X39	•		OR	X78=				
KILTIPLE DEPENDENT CLAIM PRESENT										+130	_		OR	+260=	·	
If the difference in column 1 is less than zero, enter "O" in column 2											7		OR	TOTAL	6A0	
CLAIMS AS AMENDED - PART II											- 1		,	OTHER	THAN	
	(Column 1) (Column 2) (Column 3)									SMA	u	NTITY	OR	SMALL	ENTITY	
		REN	ZAIMS MADRING NETER ENDMENT			PR	UGHEST NAMER EVIOUSLY NID FOR	PRESENT EXTRA	RATE		E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• 2	0.		Minus	-	20	- Ø		. XS 9	ĭ		OR	X\$18=		
	Independent	• ,	3		Minus		3	•Ø		X39	ı		OR	X78=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									+130	٠,		OR	+260=		
	417/15										TAL.		OR	YOYAL ADDIT, FEE		
	•	(Column 1) (Column 2) (Column 3)								ADDIT.	FEE		,	AUUH I. PEE		
5 5		RE	CAIMS MAINING AFTER ENDMENT			P	HIGHEST MUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MEMOMEN	Total	. AME			Minus	-	2()			XS	}=	755	OR	X\$18=		
	Independent			3	Minus	•••	3	•		X39	)= 		OR	X78=		
<	FIRST PRESE	IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								•13			OR	+260=		
8/1/n =										YAL		OR	TOTAL			
(Column 1) (Column 2) (Column 3)										ADOIT.	FEE			ADDIT. FEE	·	
AMENDMENT C		RE	MAIN NFTE	is BNG A		Pi	RUCKEST MUMBER REVIOUSLY	PRESENT		RAT	E	ADDI- TIONAL		RATE	ADDI- TIONAL	
	Total	. ***			Minus	<del> </del>	PAID FOR	• 2	1	XS		PEE	OR	X3182	FEE	
3	Independent	<del>۔ د</del>	<del>/ </del>	多	Minus	<b> </b> -	3	=	1	XXX	_	<del> </del>	OR	V70	100	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								]	_		<b> </b>		<b></b>	<del>                                     </del>	
" If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the Trighest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the Trighest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The Trighest Number Previously Paid For" (Total or Independent) is the highest number											O- SYAL FEE		OR	AUUTI. PER		
	The Tiighest Nur	moef P			- rer (1000										A COMMENC	